

# Youth Health Survey Report 2009

Students in  
Manitoba  
(Grades 9-12)





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## EXECUTIVE SUMMARY

### Background

Youth is a critical time period for the development of lifelong healthy lifestyles. "The common environmental stresses and behaviour patterns experienced or learned in childhood and adolescence contribute significantly to the incidence and prevalence of disease later in life, and conversely, learned patterns of healthy behaviour and stress management contribute to health throughout life."<sup>1</sup> Risk behaviours such as inadequate exercise, tobacco, drug and alcohol use tend to begin in late preadolescence and rise to a peak in the senior high school grades.<sup>2</sup> In addition, youth behavior is important because healthy lifestyles affect learning, growth, stress management and self-esteem. Early and sustained efforts are considered the most beneficial to the health of children and youth.

The Youth Health Survey (YHS) initiative was first explored when Manitoba Regional Health Authorities (RHAs) recognized there was a lack of local-level data to use for health planning and that provincial and national data was not resonating with or meeting the needs of local communities, schools and regions. In addition, the available provincial and national data did not reflect the diversity of different communities within Manitoba.

### Purpose

The purpose of the YHS is to provide RHAs, communities, schools, and school divisions with current school and community specific information on youth health, with a focus on risk factors for chronic disease. The information from the survey is to help guide evidence based planning and evaluation of policies and programs at the school, community, regional, and provincial level.

The intent of this report is to provide baseline data on the chronic disease risk factors of Manitoba students in grades 9-12. In addition, the YHS provides baseline data from which to evaluate the new Grades 11 and 12 Active Healthy Lifestyles: Physical Education / Health Education curricula.

## Survey Implementation

The survey tool was originally developed by the Interlake Regional Health Authority using input from the local level as well as validated questions adapted from national and international surveys. The survey was a census of youth in Manitoba with all RHAs approaching schools in their regions with the opportunity to participate. By the end of the 2007-2008 school year, most RHAs had surveyed grades 6-12 (n=46,919). Two regions opted not to survey grades 6-8. Therefore, the provincial report includes data collected from students in grades 9-12 (n=33,977 students).

The YHS survey consisted of 51 multiple choice questions on physical activity, nutrition, smoking, alcohol and drug use, and well-being. The survey is anonymous and confidential and participation by students is voluntary. The progress of the YHS was overseen by Partners in Planning for Health Living (PPHL).

## Future of YHS

Feedback reports on the results were produced at the school, school division and RHA level. Based on the findings of the YHS local initiatives are being led through multilevel leadership including schools, school divisions, RHAs, NGOs, and government departments.

It is the intent of all partners to conduct subsequent Youth Health Surveys. The next YHS is anticipated to take place in 2011/12. Future surveys will be used to determine changes in risk factor behaviours over time and to monitor the impact of the physical education / health education curriculum change on the activity level of students in Manitoba.



## MANITOBA QUICK FACTS

### Sample size

- 33,977 students in grades 9-12

### Physical Activity

- Only 41% of female students and 55% of male students participate in the recommended amount of daily physical activity
- 53% of students are physically active in grade 9, but the physical activity rate decreases to 41% by grade 12
- 27% of students use active transportation to get to and from school

### Nutrition

- Only 4% of students eat the recommended servings of fruits and vegetables per day

### Body Mass

- 67% of males and 79% of females fall within the recommended healthy weight category
- 13% of students consider themselves underweight, 29% overweight and 55% healthy weight

### Tobacco

- 21% of males and 21% of females in grades 9-12 report being current smokers
- 46% of male smokers and 54% of female smokers have plans to quit smoking sometime in the future
- 16% of students smoke in grade 9, but the smoking rate increases to 27% by grade 12

### Alcohol and Illegal Drugs

- 37% of students in grade 9 had at least 1 drink of alcohol in the last 30 days, but this increases to 69% in grade 12
- 34% of students had 5 or more drinks with a couple of hours on at least one day in the past 30 days
- 20% of students used illegal drugs in the last 30 days

### School Connectedness

- 76% of students feel close to people at their school
- 76% of students feel they are part of their school
- 74% of students are happy to be at their school
- 79% of students feel safe in their school
- 37% of students had felt so sad or hopeless in the past 12 months that they stopped doing some usual activities for awhile

## READING THIS REPORT

The intent of the YHS is to create a data base to be used for evaluation, planning and decision making at all levels (school and community, regional, provincial). Although the survey is a census of Manitoba students in grades 6-12, not all schools and enrolled students participated in the YHS. In addition, not all RHAs opted to survey students in grades 6-8. Therefore, there is only a complete provincial database on students in grades 9-12.

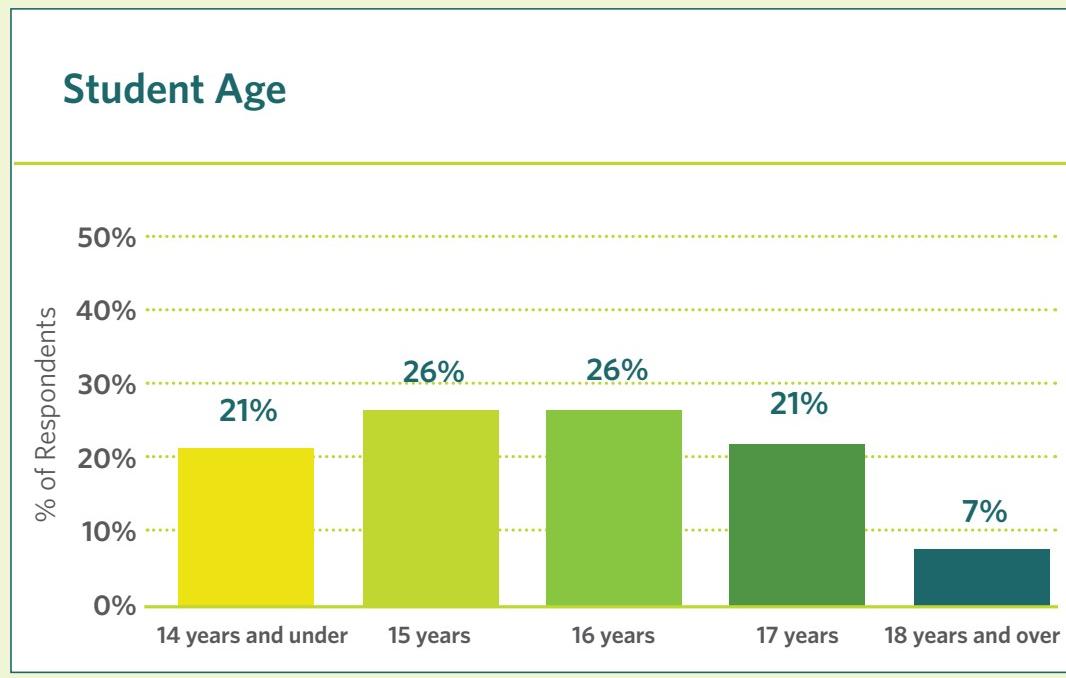
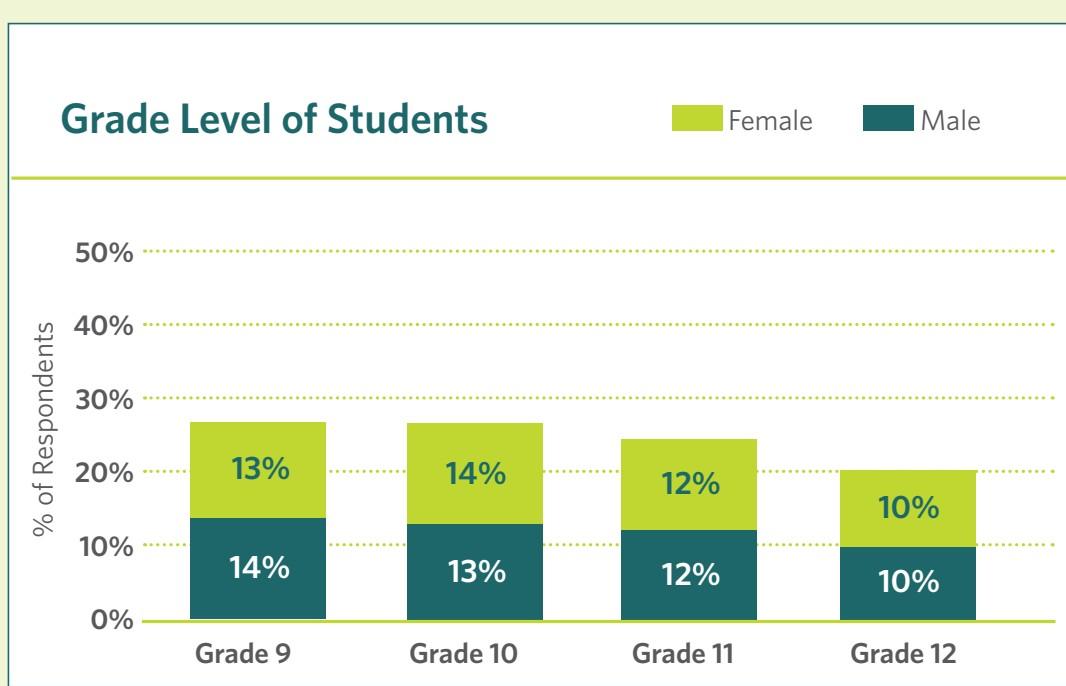
It should also be noted that differing BMI guidelines were used in the classification of a youth's weight in the feedback reports. This report used the most up to date guidelines to categorize youth's weight.<sup>3</sup> Adult guidelines for weight classification were used in some of the first feedback reports as the weight classification guidelines for youth were not available at the time. Also, during the time of the feedback report generation the Canadian Food Guide was updated. Some of the feedback reports use the 1992 Canadian Food Guidelines as Health Canada had not yet released the updated version. This report uses the 2007 Canadian Food Guidelines.<sup>4</sup>

The results in this report are presented to give a snapshot on some health behaviours in youth. The results have not been interpreted but reflect the responses of the youth themselves. In addition, the results have not been age or sex standardized and therefore, comparisons between RHAs, school divisions and schools are not valid. It is hoped that reading this report may be one step in the journey toward improving the health of students in Manitoba.

## Survey Participation

Following is the demographic profile of the students in the province who completed the survey.

The students who responded were 49% female and 49% male; 2% did not state their gender.



# Physical Activity





## Physical Activity Levels

The students of Manitoba were asked to self report how much hard (vigorous) and moderate physical activity they do each day of the week. This information was used to calculate the proportion of students who are inactive, moderately active and active enough for optimal growth and development.

Based on student self-report, 48% of students in Manitoba are active (more than 8 KKD) and another 32% are considered moderately active (3 - 8 KKD). However, 19% of students are physically inactive (less than 3 KKD).

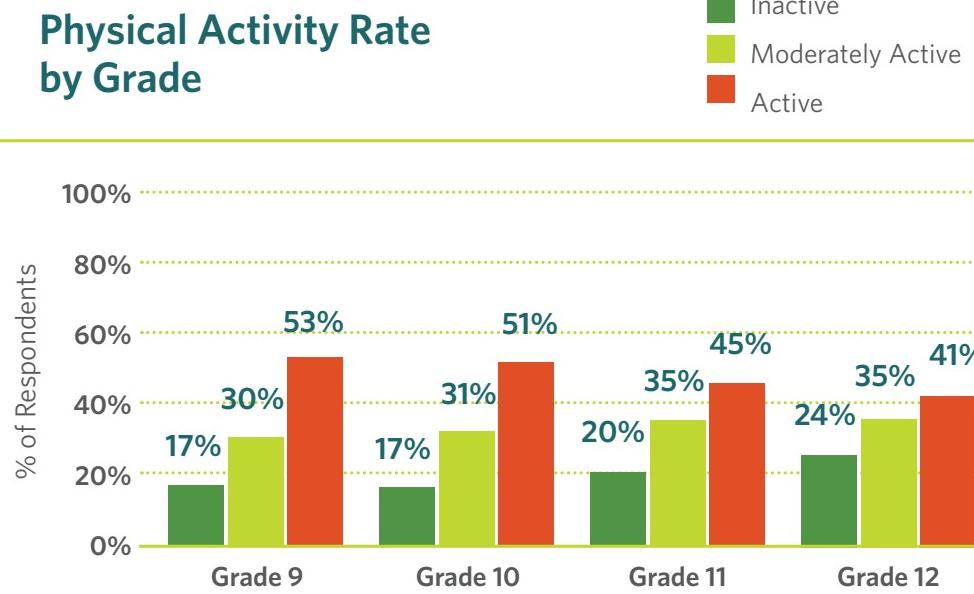
Physical activity is measured in kilocalories per kilogram per day (KKD). KKD is an estimate of how much energy a person has expended in a day.

Health Canada recommends that youth (10-14 years) be physically active a minimum of 90 minutes (6KKD) per day. This would be about equivalent to 60 minutes of moderate activity (eg. biking, raking leaves, dancing, or brisk walking), combined with 30 minutes of vigorous activity (eg. aerobics, hockey, basketball or jogging).<sup>5</sup>

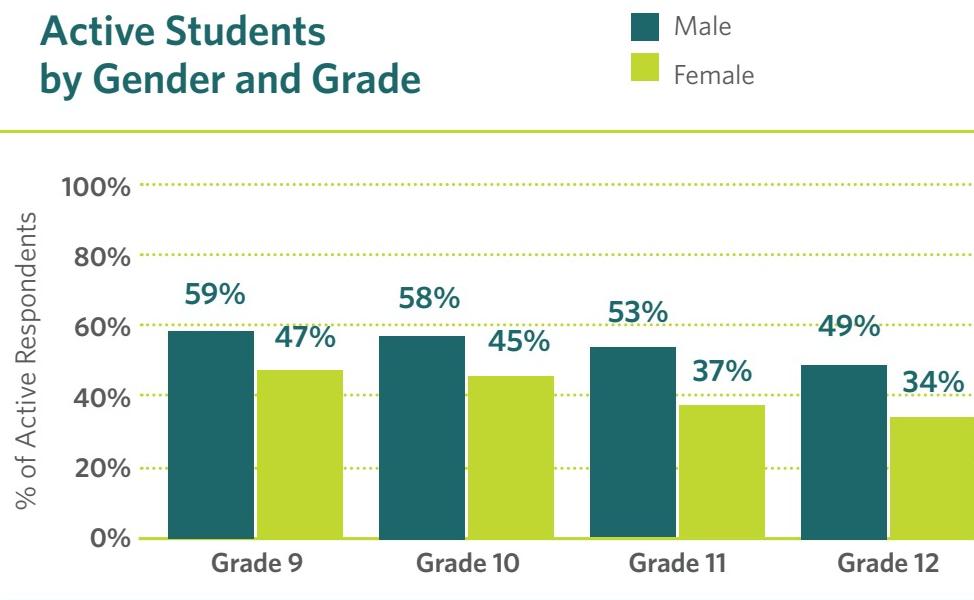
Health Canada recommends that adults (20 years and older) be physically active a minimum of 30 - 60 minutes (3KKD) per day. This would be equivalent to 60 minutes of moderate activity (eg. biking, raking leaves, dancing, or brisk walking), or 30 minutes of vigorous activity (eg. aerobics, hockey, basketball or jogging).<sup>6</sup>

The youth surveyed in this report (14-19 years) do not coincide directly with Health Canada's physical activity recommendations for youth (10-14 years) or adults (20 years and older). At this point, Health Canada has not identified specific guidelines for this age group and therefore the youth in this survey will be compared to the following: active (more than 8KKD), moderate (3-8KKD), and inactive (less than 3KKD).<sup>7</sup>

### Physical Activity Rate by Grade



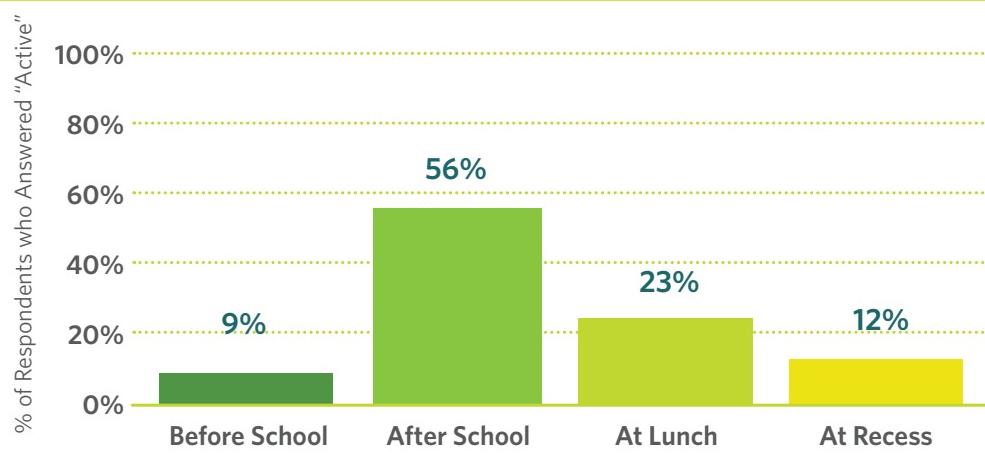
### Active Students by Gender and Grade



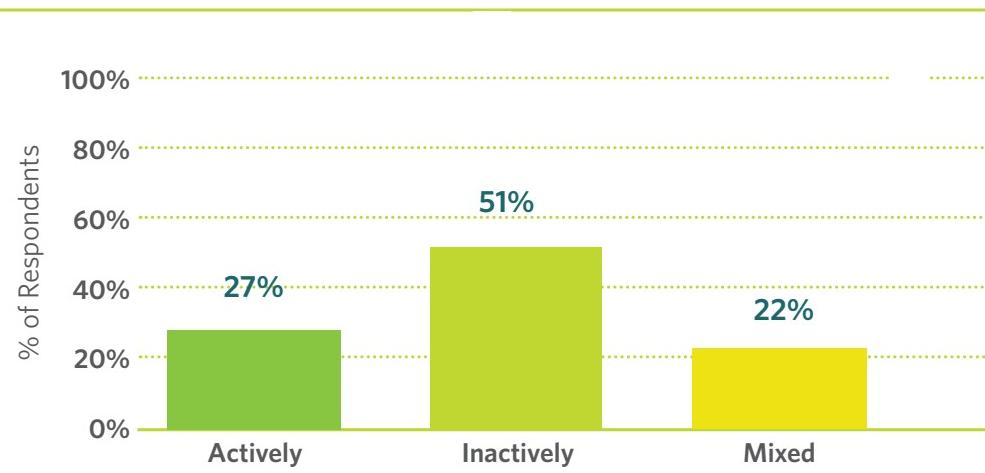
## When Students are Active



### Time of Day When Students are Physically Active



### How Students Get To And From School



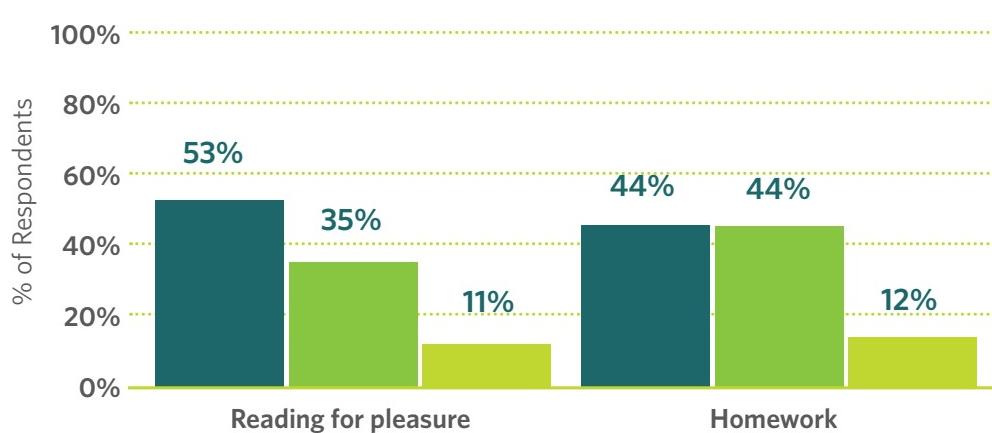


## Non-Active Time

The following graph and table show how much time students in Manitoba spend in sedentary activities each week.

### Time Spent Reading & Doing Homework Per Week

Legend:  
■ Less than 1 hour  
■ 1 to 6 hours  
■ 7 hours or more



Note: In this graph, "reading" refers to reading done for pleasure (i.e. does not include reading for work, homework, or school).



Time spent on "screen" each day	Less than 1 hour	1-2 hours	3 hours or more
Monday	35%	40%	23%
Tuesday	37%	38%	22%
Wednesday	37%	37%	23%
Thursday	37%	37%	23%
Friday	37%	33%	27%
Saturday	33%	29%	34%
Sunday	32%	30%	35%

Note: Screen time includes watching TV, movies, playing video games, surfing the internet or talking on the phone.

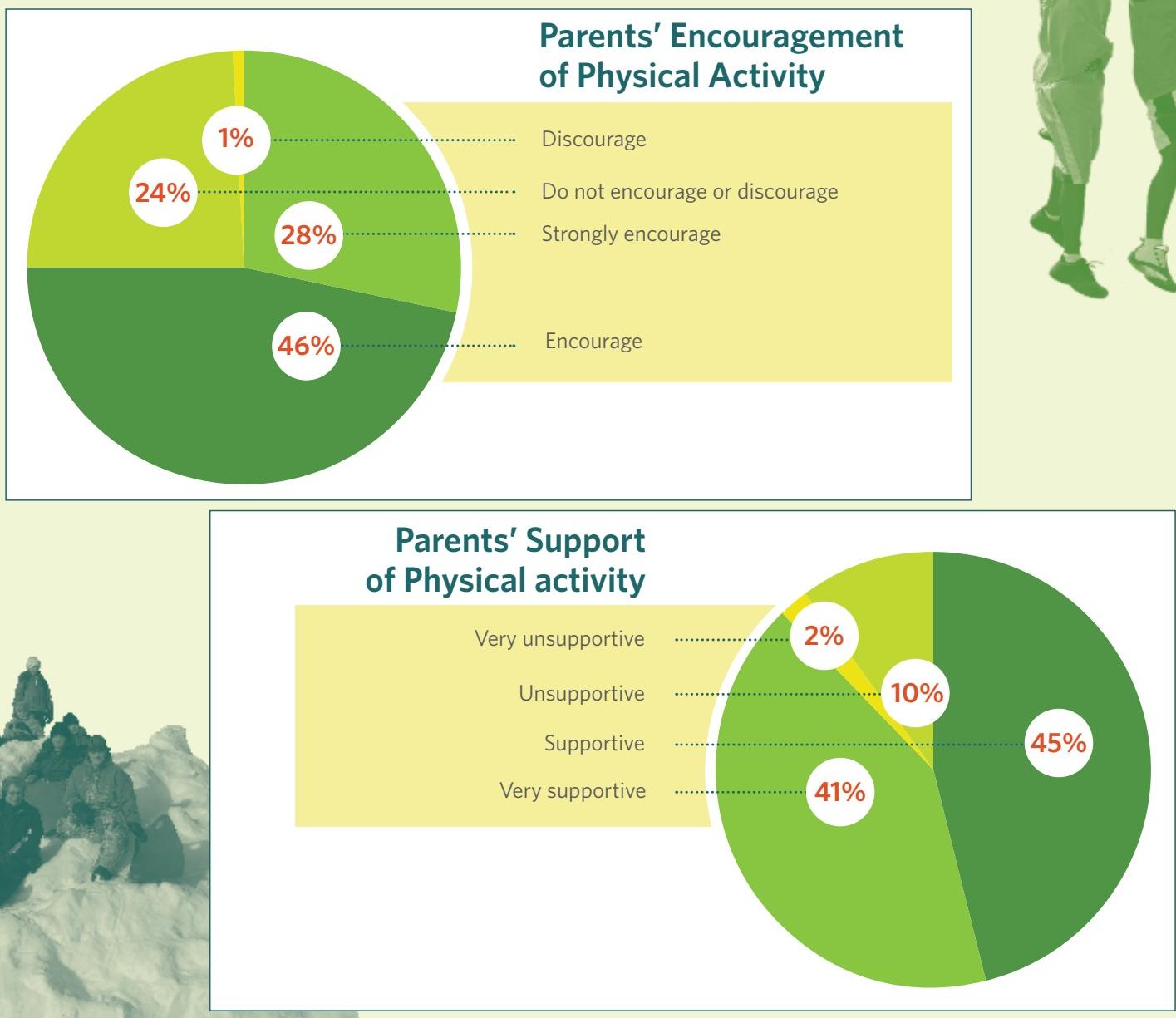
Canada's Physical Activity Guide for Youth recommends:<sup>8</sup>

1. Increasing time currently spent on physical activity starting with 30 minutes or more per day.
2. Reducing non-active time spent on TV, videos, computer games and surfing the internet starting with 30 minutes less per day.

To promote overall health, students should decrease the total amount of time they are inactive while maintaining homework and reading time.

## Factors Supporting Physical Activity

Manitoba students were asked if their parents encouraged them to be physically active. Students were also asked if their parents supported them (such as helping them to join or get to activities). 74% of the students said that their parents encouraged/strongly encouraged them to be physically active and 86% of the students said that their parents were supportive/very supportive of their participation in physical activities.



Students were asked how many of their closest friends are physically active. 83% of the active students reported that three or more of their closest friends were physically active.

## Satisfaction with Number of School Sports

Male  
Female



## Satisfaction with Number of School Sports

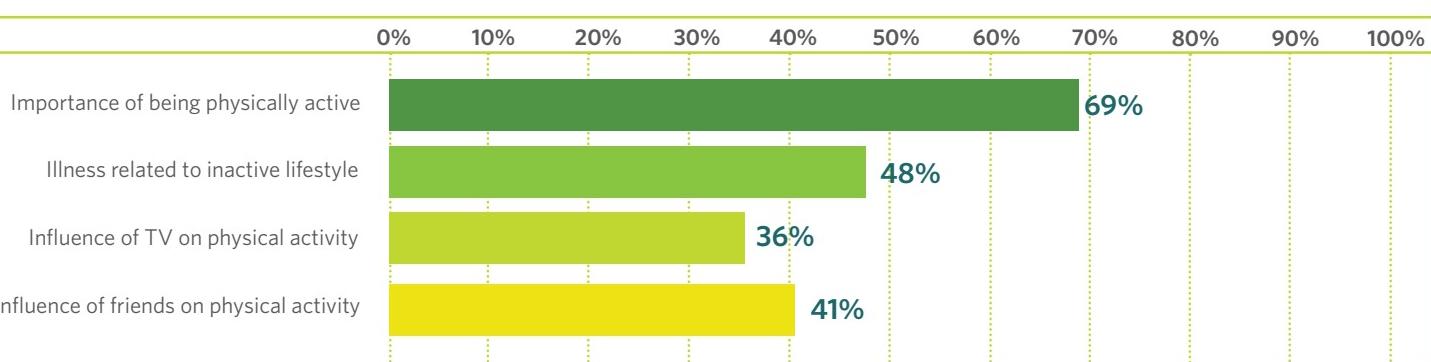
50% of students in Manitoba stated they felt that the number of sports offered at their school was just right. Another 22% felt there were too few sports offered at school.

## Student Perceptions of Physical Activity Education at School

Students were asked if the subjects at school addressed topics related to physical activity. The graph below shows the percentage of students who thought that these issues were taught at their school.

### Physical Activity Issues Taught in School

% Respondents that said YES



# Healthy Eating

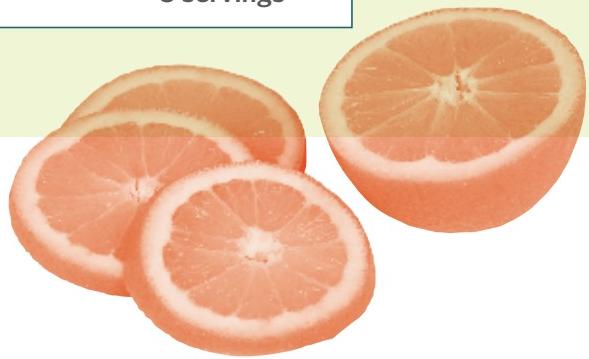
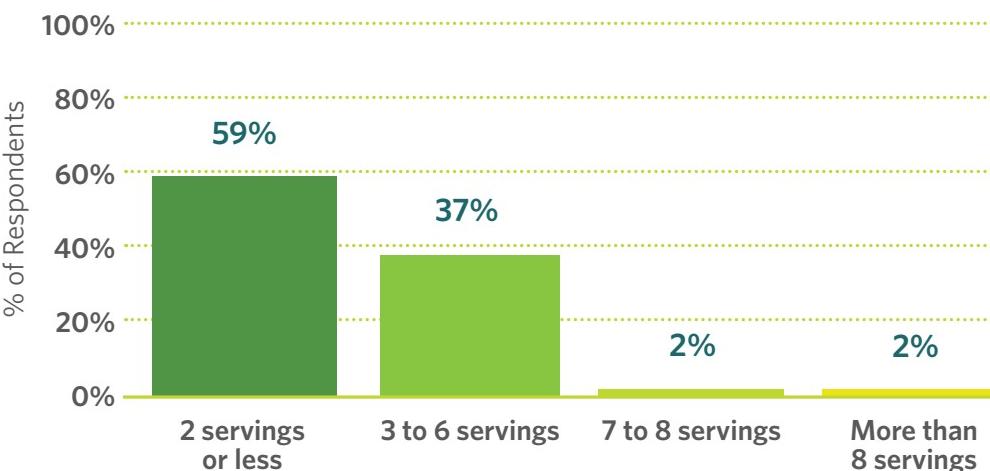


## Eating Habits of Students

Canada's Food Guide recommends that females 14 to 18 years of age consume at least seven servings of fruits and vegetables on a daily basis; males of the same age should consume at least eight servings of fruits and vegetables.<sup>9</sup>

In this survey, students were asked to indicate the number of servings of fruits and vegetables they consumed on a regular basis. Based on student survey responses, 4% of students in Manitoba consumed seven or more servings of fruits and vegetables per day.

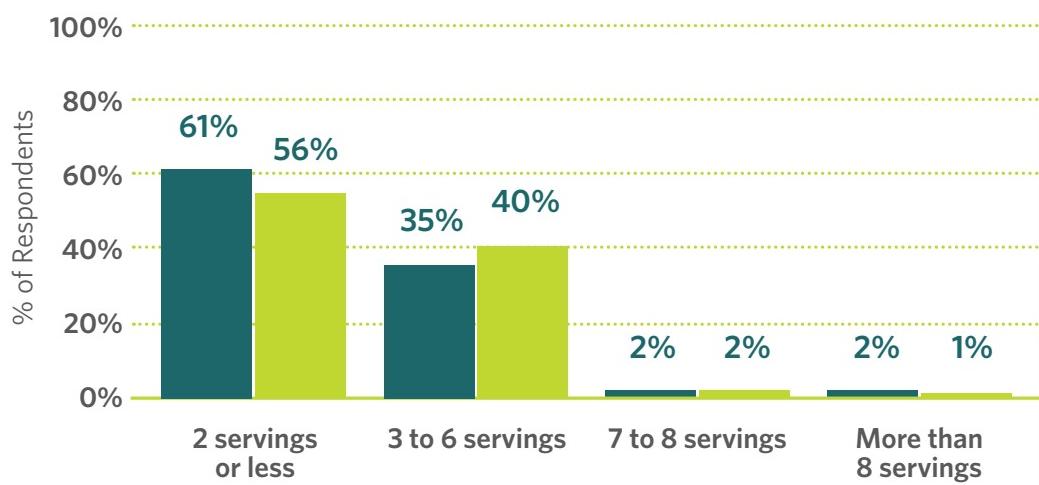
### Number of Daily Servings of Fruit and Vegetables Consumed





### Number of Daily Servings of Fruits and Vegetables Consumed by Gender

Male  
Female



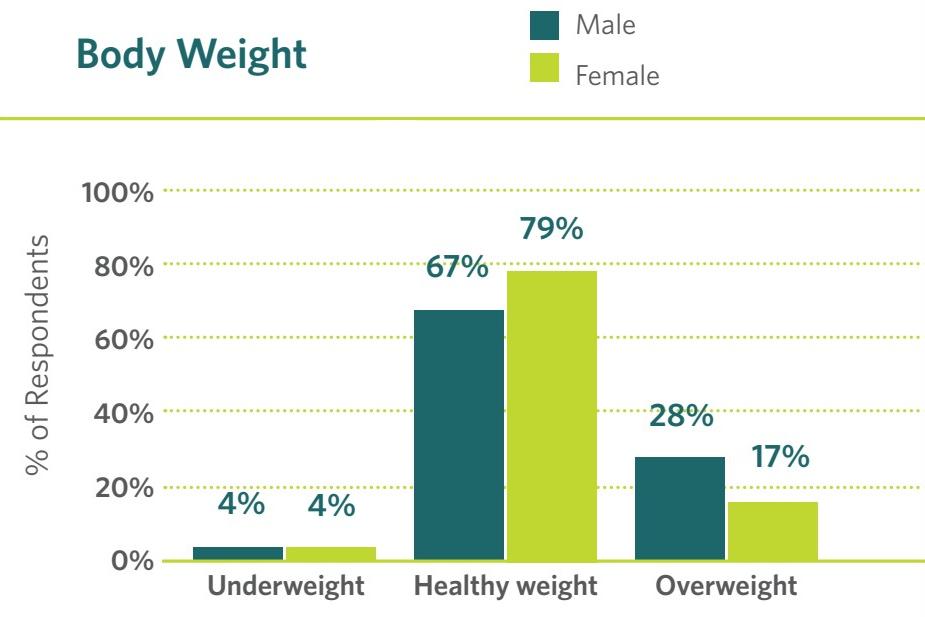
Grades 9-12 in Manitoba

## Healthy Body Weight

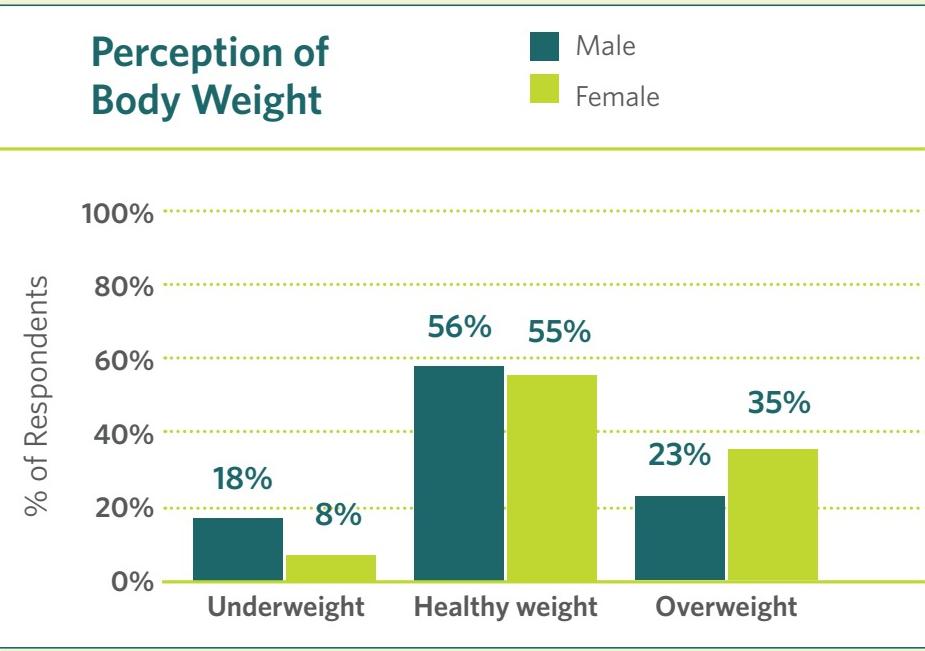
Healthy body weight can be assessed using body mass index (BMI). BMI is calculated using weight and height. In children and teens (unlike adults), BMI is age- and sex-specific and is often referred to as BMI-for-age. BMI values are more meaningful if information about the nutritional and physical activity habits of the teenager are also known. For example, if the BMI is near the upper end of the range and nutritional and physical activity habits are poor, the teen is likely overweight; if the BMI is near the lower end of the range and nutrition habits are restrictive and/or physical activity habits are excessive, this can be a sign of problems that affect normal growth.<sup>10</sup> Of the students with a valid BMI, 67% of the males and 79% of the females fall within the recommended healthy weight category for their age.

An accurate and realistic perception of one's weight can influence nutrition habits. 56% of the males and 55% of the females in Manitoba perceive their body weight as healthy. It is important to note that, regardless of weight, "body image dissatisfaction is a strong precursor to emotional problems, unhealthy nutrition habits and, in extreme cases, to eating disorders."<sup>11</sup>

**Body Weight**



**Perception of Body Weight**



# Smoking, Alcohol and Drug Use

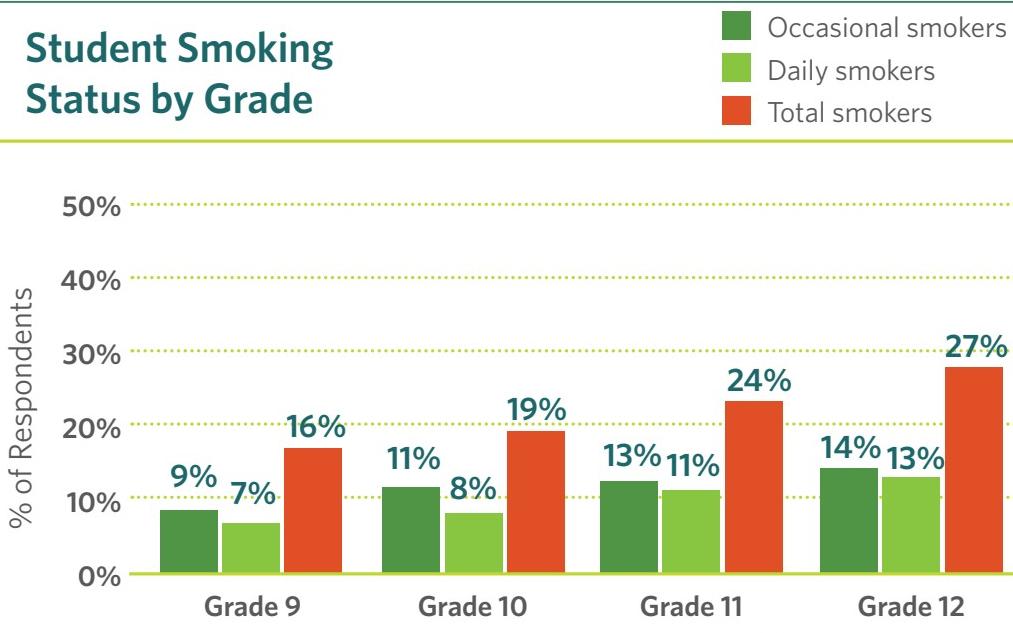




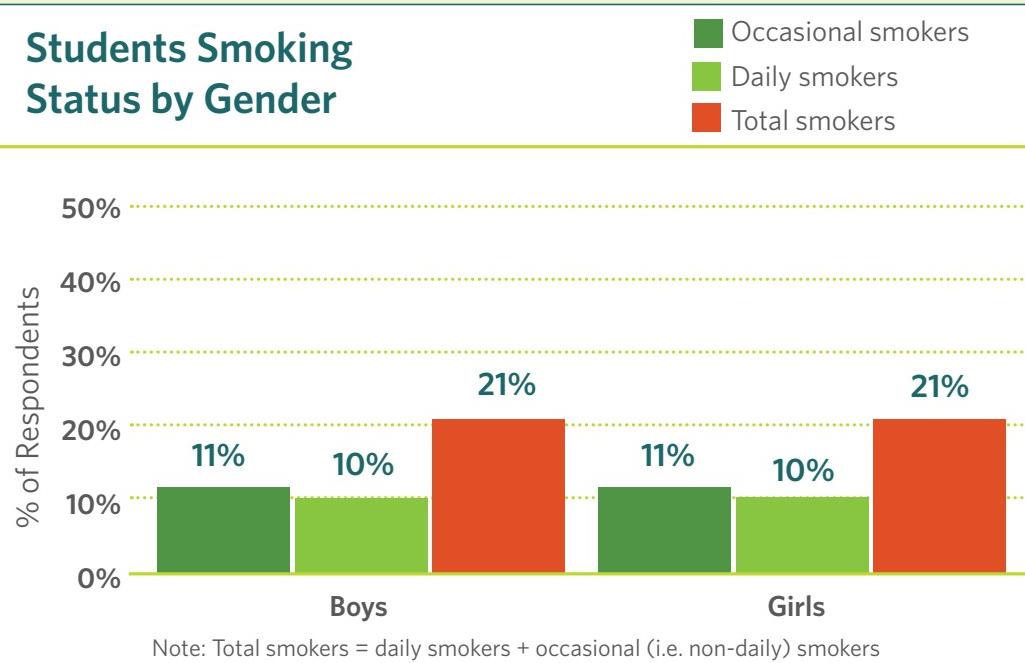
## Students Who Smoke in Manitoba

The Canadian Tobacco Use Monitoring Survey indicates that 20% of youth aged 15-19 in Manitoba and 15% of youth aged 15 to 19 in Canada were current smokers in 2007.<sup>12</sup> The student responses in the YHS indicated that 21% of males and 21% of females in grades 9-12 are smokers.

### Student Smoking Status by Grade



### Students Smoking Status by Gender



## Factors that Influence Student Smoking

Students start smoking for a variety of reasons. Peers and family members are especially influential in the decision to start or continue smoking. These influences are sometimes direct (e.g. peer pressure), but more often are indirect (e.g. modeling). Students in Manitoba were asked a series of questions about peers and family.

79% of daily smokers and 43% of occasional smokers report that three or more of their closest friends smoke cigarettes. 5% of non-smokers report that three or more of their closest friends smoke.

Students were also asked how many people, in addition to themselves smoked inside their home everyday or almost everyday.

- **63% of the daily smokers**
- **45% of the occasional smokers, and**
- **27% of the non-smokers**  
**in Manitoba reported that at least one person inside their home smoked on a daily basis.**

Not only are students whose parents smoke more likely to become smokers themselves, it is also a health concern if family members smoke in the home.

Students were also asked a question about their school's smoking policy. 66% of the respondents indicated that their school has a clear set of rules about smoking for students to follow and 11% of students reported that their school does not. The remaining 20% indicated that they didn't know.



## How Students Obtain Cigarettes

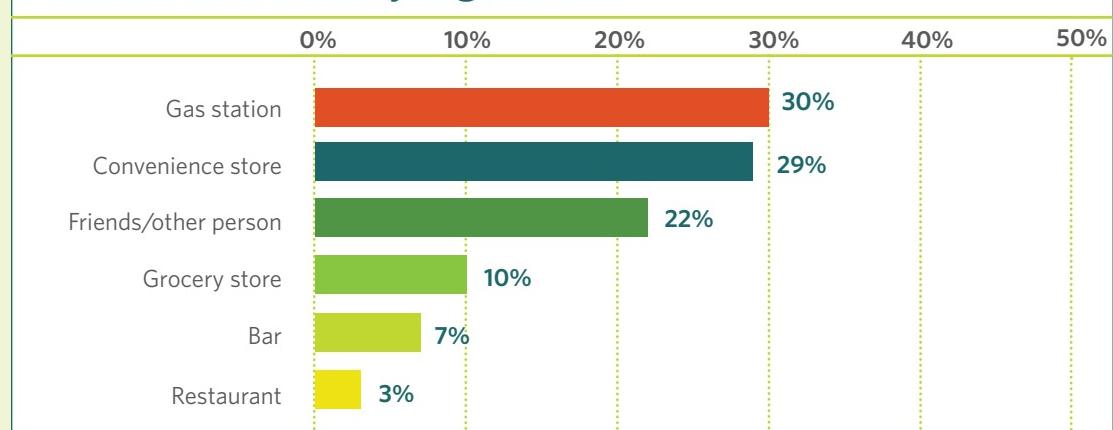
Most of the students in Manitoba are under the age of 18. Despite the fact that federal law prohibits the sale of cigarettes to anyone under the age of 18, many students are able to buy cigarettes and in most cases they are not asked their age.

### Students Who Smoke Usually Get Their Cigarettes in the Following Ways:



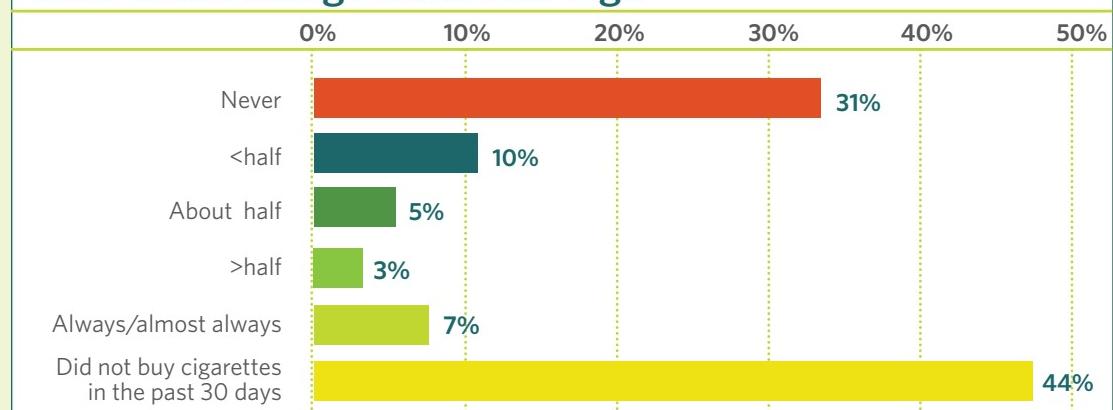
Students who smoke and buy their own cigarettes were asked where they buy their cigarettes:

### Where Students Buy Cigarettes



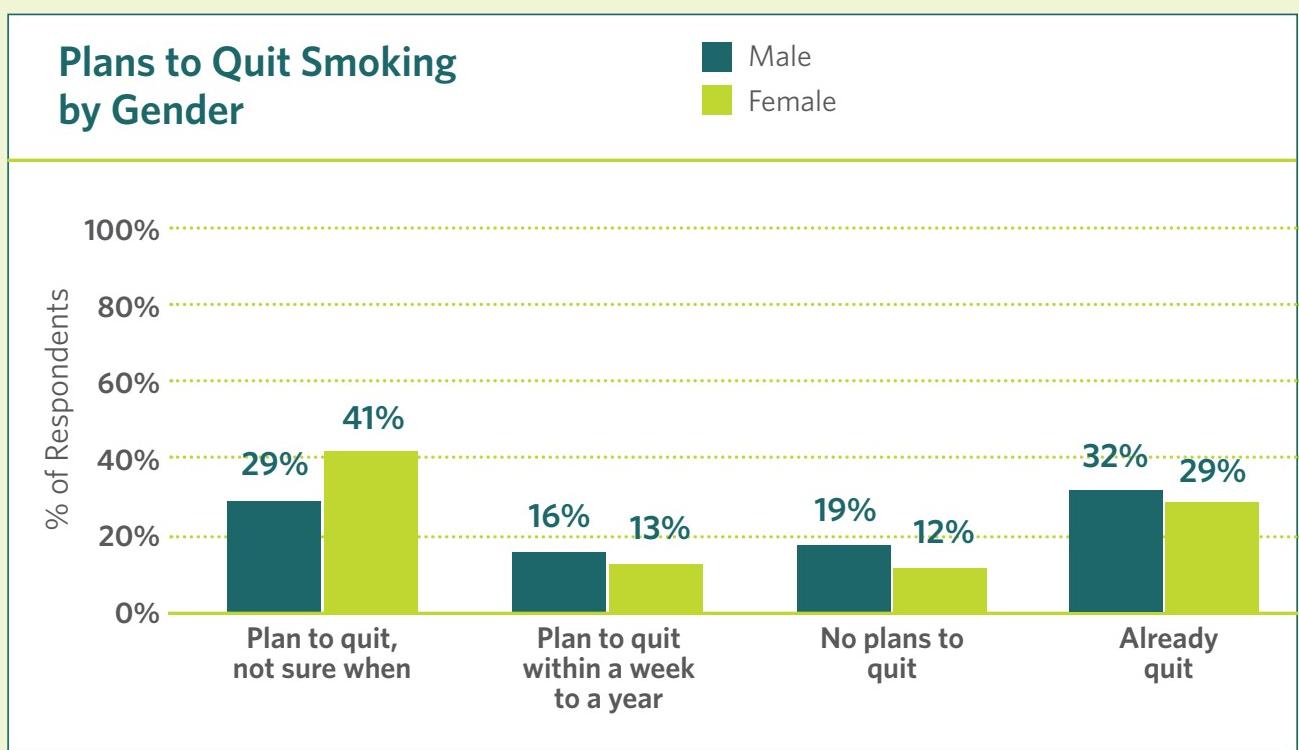
The table to the right outlines in the past 30 days how frequently students in Manitoba are asked their age when trying to buy cigarettes.

### How Often Being Asked Your Age



## Trying to Quit

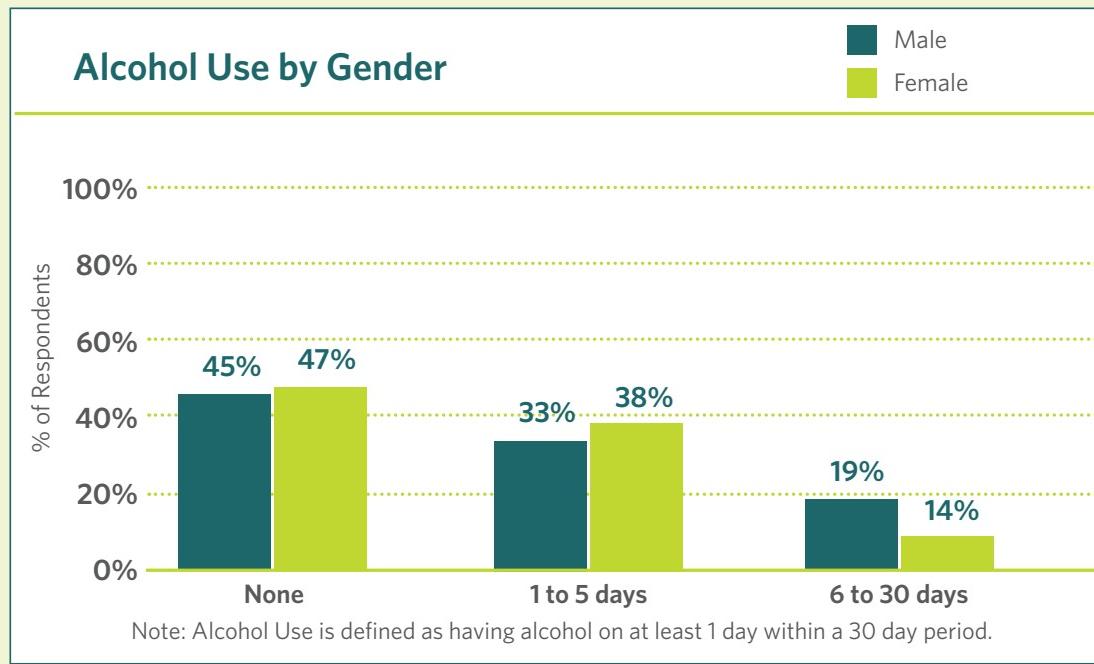
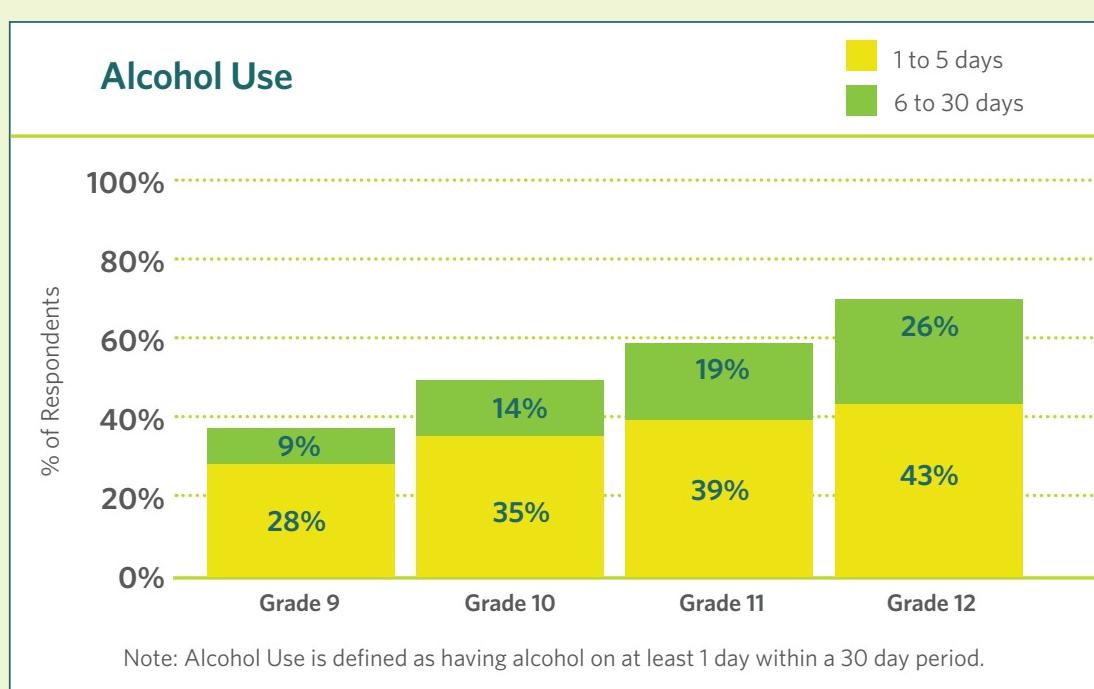
Quitting smoking is not an easy process for adults or for youth. New evidence indicates that the first symptoms of addiction to nicotine may occur as early as a few days or weeks after the beginning of even occasional smoking by youth.<sup>13</sup> Students can have a very difficult time quitting even when they have strong motivation to do so.





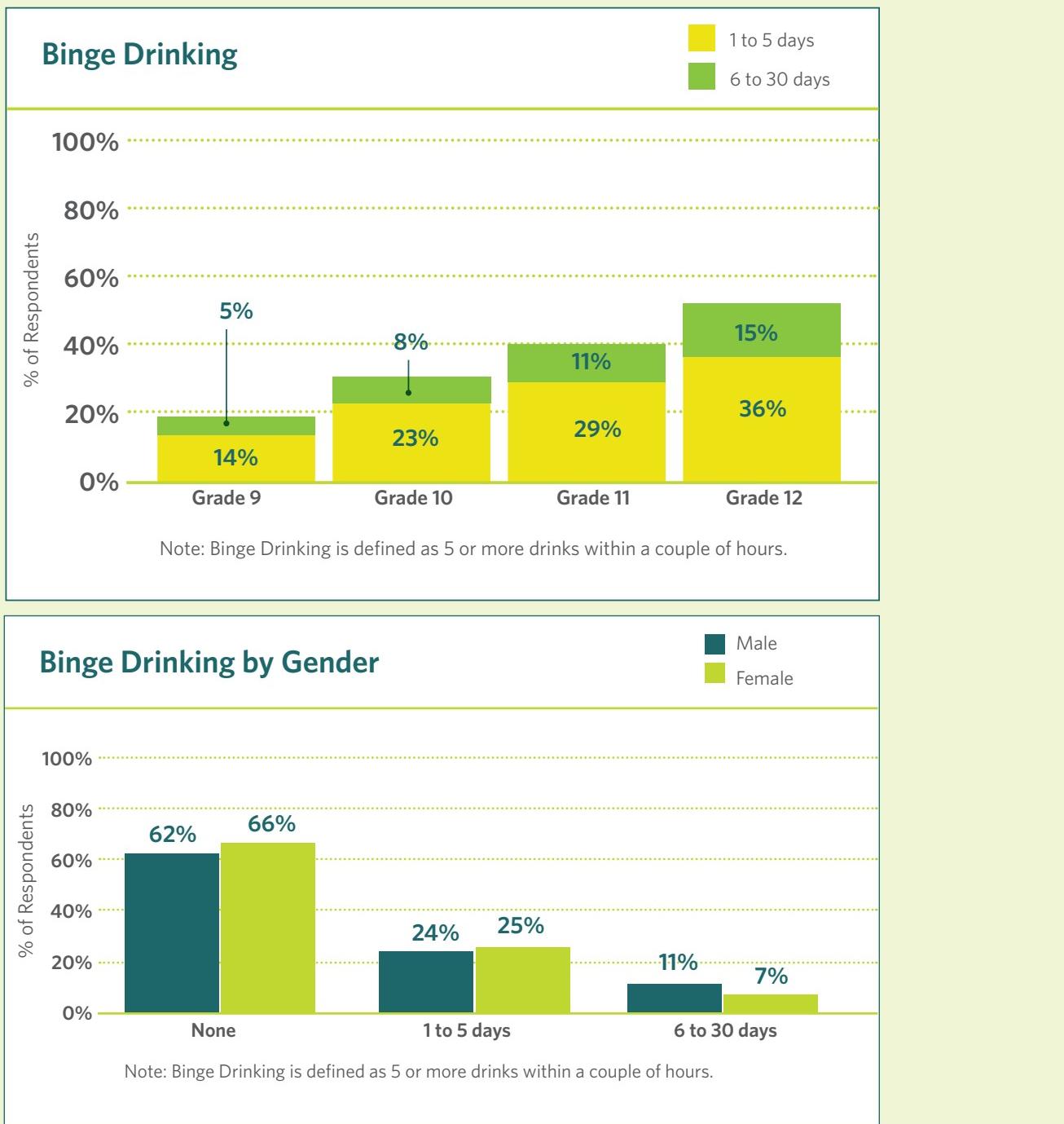
## Alcohol & Drug Use

Alcohol abuse is associated with motor vehicle and water-related injuries and deaths, vandalism, alcohol poisoning and violence.<sup>14</sup> Harmful use patterns, started young and carried into adulthood, worsen these problems, and chronic alcohol abuse leads to a number of acute and chronic disease conditions.



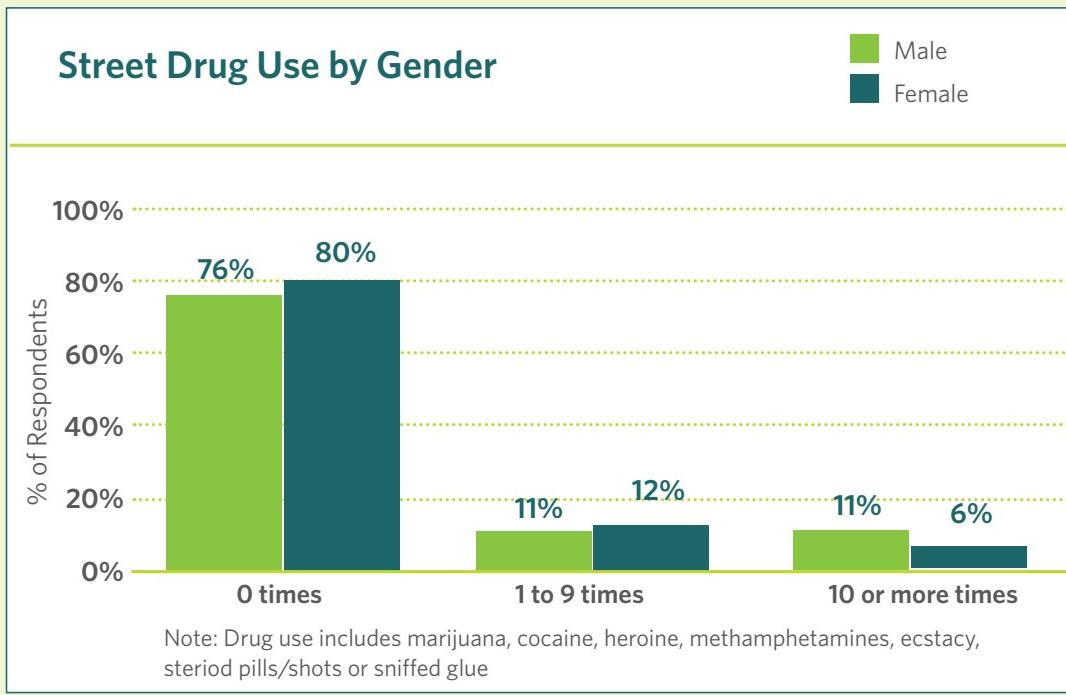
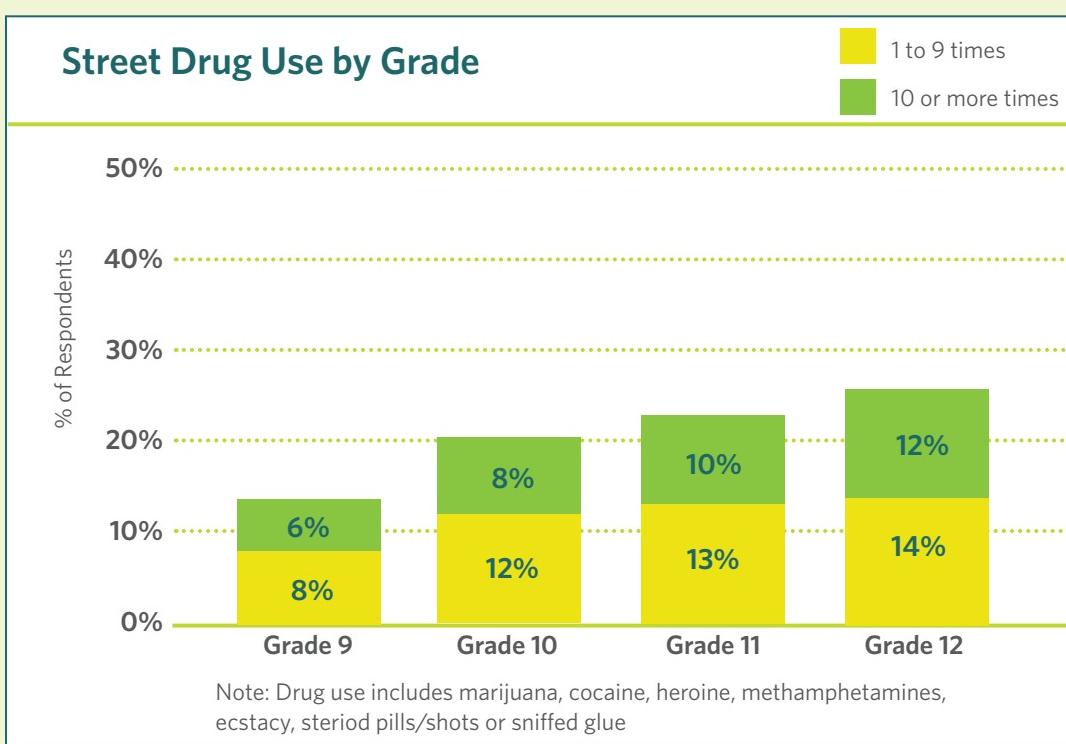
When asked "During the past 30 days, on how many days did you have at least one drink of alcohol?", 36% of respondents indicated that they had consumed alcohol between 1 and 5 days and 16% had consumed alcohol between 6 and 30 days. (See graphs on page 22.)

When asked "During the past 30 days, on how many days did you have 5 or more drinks of alcohol within a couple of hours?", 34% indicated that they had 5 or more drinks of alcohol within a couple of hours on at least one of the past 30 days.





When asked about illegal drug use 20% of the students in Manitoba indicated that they had used street drugs such as marijuana, cocaine, heroine, methamphetamines, ecstasy, steroid pills/shots or sniffed glue at least one time in the past 30 days.



# Well-Being



Photo: 2008 © Manitoba First Nations Education Resource Centre Inc.

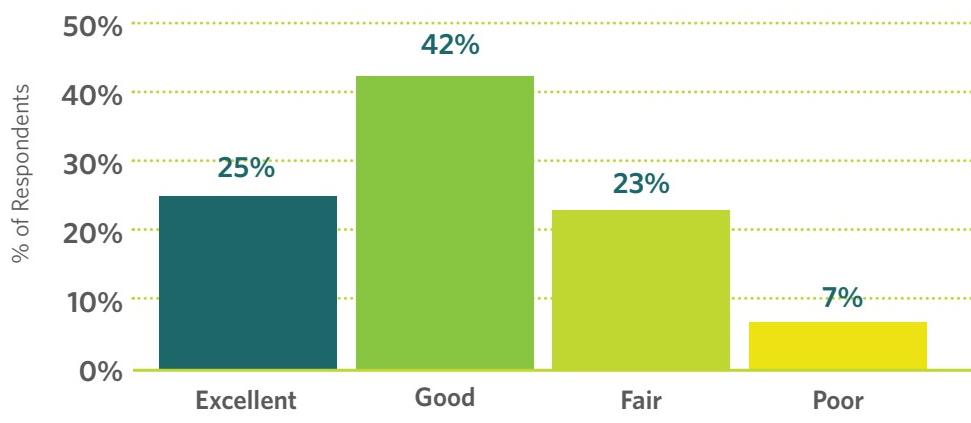


## Overall Feelings of Well-being

Students were asked to compare themselves to other students their own age on how well they were doing in their school work, and how they would rate their athletic ability.



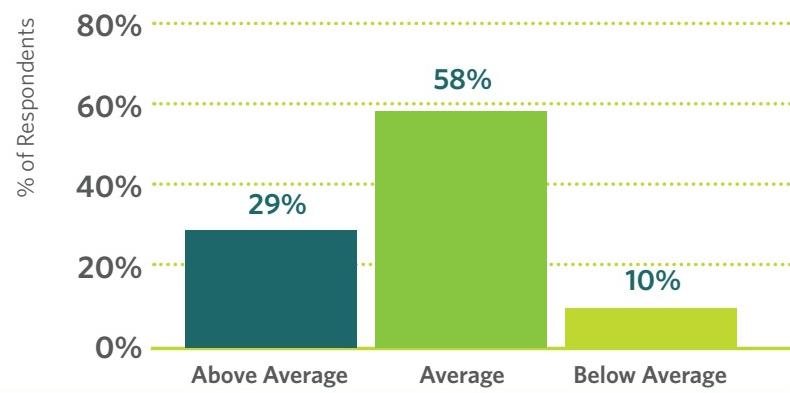
### Athletic Ability



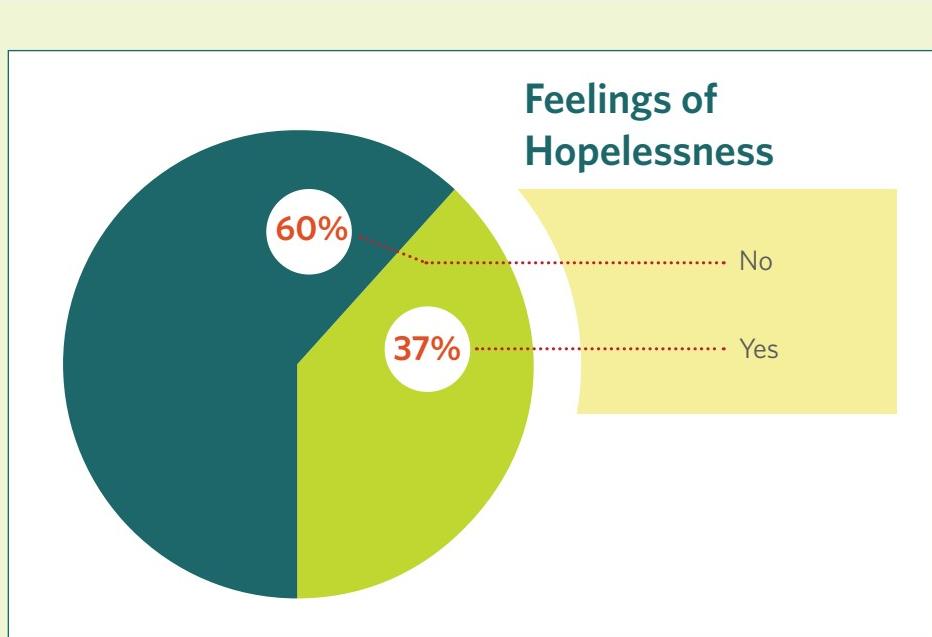
67% of students rated their athletic ability as excellent or good.

87% of students rated their school work as average or above average.

### School Work



Students were also asked if during the past 12 months, they ever felt so sad or hopeless that they stopped doing some usual activities for a while. 37% of students stated that they had felt so sad or hopeless in the past 12 months that they stopped doing some usual activities for a while.



## School Connectedness

Students who feel an attachment to their school and who consider their teachers to be supportive are less likely to engage in unhealthy or risky behaviors. Here is what Manitoba students said about their school environment:

How strongly do you agree or disagree with the following statements?	Agree/ Strongly Agree	Disagree/ Strongly Disagree
I feel close to the people at this school	76%	19%
I feel I am part of this school	76%	18%
I am happy to be at this school	74%	17%
I feel safe in my school	79%	15%



## Future Steps

This report is provided to you as a snapshot of students' health in Manitoba. There is growing evidence of the link between healthy child development and chronic disease prevention. There is opportunity at all levels (school, community, regional and provincial level) to influence the future health and social circumstances of students.

This report signifies the beginning of having provincial level data to support evidence based planning, and policy decisions at the provincial level. The next steps/actions are being led through multilevel leadership including schools, school divisions, RHAs, NGOs, and government departments. It is intended that future waves of this survey will allow for measurement of program and planning success. For further information and access to tools and resources for YHS please visit the PPHL website ([www.healthincommon.ca/pphl/youth-health-survey](http://www.healthincommon.ca/pphl/youth-health-survey)).

We hope you find this report a valuable resource and we look forward to working together to improve the health of Manitoba's youth.



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## Acknowledgements

The development and implementation of the Youth Health Survey in Manitoba was made possible through the efforts and commitment of many organizations and individuals including the following:

- The administrators, teachers, and staff of all the schools within Manitoba who participated in the Youth Health Survey.
- The Regional Health Authorities of Manitoba for their vision and support in implementing the Youth Health Survey throughout their regions.<sup>1</sup>
- CancerCare Manitoba, for their assistance in survey implementation, statistical programming, and data analysis, and to the CancerCare Manitoba Foundation for their generous support.
- Heart and Stroke Foundation of Manitoba for funding support to produce the surveys.
- Interlake Regional Health Authority for sharing their original survey tool, template and survey protocols.
- Manitoba Education, Citizenship and Youth, Manitoba Health and Healthy Living and Healthy Child Manitoba for promoting and supporting the data collection.
- Health in Common for supporting the production and dissemination of the Youth Health Survey report.
- **Students of Manitoba for their enthusiasm, honesty and willingness to share personal information in filling out the Youth Health Survey.**

<sup>1</sup>Assiniboine, Brandon, Burntwood, Central, Churchill, Interlake, NOR-MAN, North Eastman, Parkland, South Eastman, Winnipeg



## Partners in Planning for Healthy Living

Partners in Planning for Healthy Living (PPHL) is a group of Manitoba partners who share a common goal - the prevention of chronic diseases. PPHL partners work together as a team to develop organizational, community and regional ability to plan programs for healthy living in communities across Manitoba.

### Partners to date include:

- Alliance for the Prevention of Chronic Disease
- Assiniboine Regional Health Authority
- Brandon Regional Health Authority
- Burntwood Regional Health Authority
- Canadian Cancer Society, Manitoba Division
- CancerCare Manitoba
- Churchill Regional Health Authority
- Health in Common
- Healthy Child Manitoba
- Heart and Stroke Foundation of Manitoba
- Interlake Regional Health Authority
- Manitoba Education Citizenship and Youth
- Manitoba Health and Healthy Living
- NOR-MAN Regional Health Authority
- North Eastman Regional Health Authority
- Parkland Regional Health Authority
- Public Health Agency of Canada, Manitoba and Saskatchewan Region
- Regional Health Authority – Central Manitoba Inc.
- South Eastman Health
- Winnipeg Regional Health Authority

The partners are working together to build a Manitoba Risk Factor Surveillance System while recognizing the uniqueness within each Manitoba community.

Some of the activities of the surveillance system will include:

- surveillance (data gathering on chronic disease risk factors such as physical activity, nutrition, tobacco, alcohol and drug use)
- knowledge exchange (identifying and sharing results, effective practices and lessons learned. Activities include but are not limited to workshops, presentations, tool kit development and reports)
- program and policy development, implementation, evaluation
- academic research

PPHL supports these activities at the regional and community level. As the Manitoba Risk Factor Surveillance System gains momentum, new partners are being engaged.

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## Contacts and Resources

For further information on  
the Youth Health Survey  
Report — Students in  
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For information on your region please contact your local Regional Health Authority.



**Partners in Planning for Healthy Living**

[www.healthincommon.ca/PPHL](http://www.healthincommon.ca/PPHL)